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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/torm990.

Open to Public Inspection

A F	or the	2013 calendar year, or tax year beginning NOV 1, 2013 and	ending (	OCT 31, 2014	
B c	heck if pplicable	C Name of organization		D Employer identifi	cation number
	Addres:	Miller County Farm Bureau			
	Name change	Doing Business As		71-0	331296
F	]Initial return ]Termin- ated		Room/suite		er 772–4661
Ē	Amendo			G Gross receipts \$	199,508.
	Applica tion	Texarkana, AR 71854-5875		H(a) Is this a group r	
	pending	F Name and address of principal officer DI all QOII WI ell		for subordinates	s? Yes X No
		same as C above		H(b) Are all subordinates i	ncluded? Yes No
		mpt status 501(c)(3) X 501(c) ( 5 ) ◀ (insert no ) 4947(a)(1) (	or 52	<b>-</b>	list (see instructions)
	-	e:▶www.arfb.com/miller	1	H(c) Group exemption	
,		organization X Corporation Trust Association Other	L Yea	r of formation 1944	M State of legal domicile AR
P		Summary	1 L	ual Dwamatia	
ë	1 E	Briefly describe the organization's mission or most significant activities: $\overline{\mathtt{Agri}}$	cultu:	ral Promotio	on
Activities & Governance	-				
Jerr		Check this box I if the organization discontinued its operations or dispos	sed of mo	į.	ssets.   18
õ	1	Number of voting members of the governing body (Part VI, line 1a)		3	18
જ		Number of independent voting members of the governing body (Part VI, line 1b)		4	10
ties		Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	30
Ξ	i	Total number of volunteers (estimate if necessary)		6	1
Ac	ł	Total unrelated business revenue from Part VIII, column (C), line 12		7a	114,944. -33,395.
	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34	<del></del>	7b	***
			_	Prior Year 0.	Current Year 0.
e	I	Contributions and grants (Part VIII, line 1h)	-	51,240.	49,395.
Revenue	t .	Program service revenue (Part VIII, line 2g)	-	440.	-589.
Re		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	145,770.	149,483.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-		198,289.
		Total revenue - add lines 8 through 11 must equal Part VIII, column (A), line 12)		197,450.	2,500.
		Grants and similar amounts paid (Part IX, column (A), lines (3)		2,500.	2,300.
		Benefits paid to or for members (Part IX, column (A) line 4)		90,950.	90,764.
ses	1	Salaries, other compensation employee benefits (Part IX, column (A), lines 5-10)		90,930.	0.
ë	ı	Professional fundraising fees (Part IX. column (A), line Te)	0.	V •	0.
<b>F</b>		Total fundraising expenses (Part IX & (Phi) (D) Nine 25)	<u> </u>	97,322.	97,812.
20 Expenses	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	190,772.	191,076.
ĺζ	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	6,678.	
	19	Revenue less expenses. Subtract line 18 from line 12		eginning of Current Year	End of Year
\$5 6	00 -	Fatal assate (Bort V June 16)	<u> </u>	318,983.	325,891.
SSE	20	Fotal assets (Part X, line 16) Fotal liabilities (Part X, line 26)	-	16,562.	16,257.
Met Assets or Fund Balances	21 22 1	Net assets or fund balances Subtract line 21 from line 20		302,421.	309,634.
Ď,	art II	Signature Block			30270011
مسيستكام		ties of perjury, I declare that I have examined this return, including accompanying schedule	s and state	ments, and to the hest of m	ny knowledge and belief it is
5		, and complete Declaration of preparer (other than officer) is based on all information of wi			.,
90 100	, 0011001	, and some of the state of the			
ربن Sig	<u>,</u>	Signature of officer		Date	/ /
Her		Brandon Wren Presida	+	10	<i>9011</i> .(
	`	Type or print name and title	<del> (</del>		
_		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Paid	, ,	Sherry Chesser, CPA Sherry Chus		7-30-15 if self-emplo	P00174819
	parer	Firm's name Thomas & Thomas LLP		Firm's EIN	71-0271741
	Only	Firm's address 201 E. Markham, Suite 500	-		
	.	Little Rock, AR 72201		Phone no 50	1-375-2025
May	v the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No
	01 10-29		ons.	···	Form <b>990</b> (2013)

Form	990 (2013) Miller County Farm Bureau	71-0331296	Page 2
	rt III. Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1,			
•	Agricultural Promotion		
	ngi i cui cui ui i i como ci con		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes [	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	massured by expenses	
•	·		. d
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	irs, the total expenses, ar	Ш
	revenue, if any, for each program service reported.		
<b>4</b> a	(Code) (Expenses \$ including grants of \$) (Revenue)	.e\$	)
	County Farm Bureau work is general in nature, helping fa		
	achieve educational improvements, economic opportunity,	and social	
	advancement.		
			·
4b	(Code) (Expenses \$) (Revenue	re \$	)
		<del></del>	
			<del></del>
		<del></del>	
4c	(Code) (Expenses \$ including grants of \$) (Revenue	Je \$	)
		<u> </u>	
		<del></del>	
4-4	Other program services (Describe in Schedule O.)		
70		•	
	(Expenses \$ Including grants of \$ ) (Revenue \$		
<u>4e</u>	Total program service expenses		

Form 990 (2013) Miller County Farm Bureau
Part IV. Checklist of Required Schedules

			Yes	No
1 `	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	ļ	Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3_		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
=	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	x	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
·	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	ļ.,,	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		Х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	<u>11</u> b		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			17
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	1.70		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	<u> X</u>
þ	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь	990	L
		FORM	3350	ZU13:33

Form 990 (2013) Miller County Farm Bureau
Part IV. Checklist of Required Schedules (continued)

rai	t 14. Checklist of Required Schedules (continued)			
			Yes	No
21 `	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			,,
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	-	<u> </u>
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			.,
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	]	,	
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	1		
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35 <u>a</u>		Х
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36_		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
-	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
				(0040)

	990 (2013) Miller County Farm Bureau 71-0331	2 7 0	<u></u>	age 3
Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return		v	
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		v	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u>X</u>	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			X
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		1
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	36		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		х
	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- 00		
Ь		6b		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	<del> </del> -	-	
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
·	to file Form 8282?	7c		
ч	If "Yes," indicate the number of Forms 8282 filed during the year			
	The state of the s	7e		ļ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	<u> </u>	<u> </u>
h	the first first first the first product of the proportion file a Form 1008-C2	7h	ļ	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	96		ļ
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a	Closs modified the manual of the control of the con			
b	· · · · · · · · · · · · · · · · · · ·	1		
10-	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		T
a	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	ment of the second state o			
•	organization is licensed to issue qualified health plans	]		
С	130	<u>L</u>	<u> </u>	
14a	and the second s	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>

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Par	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	140 16	spon	S <del>C</del>
				X
<u> </u>	Check if Schedule O contains a response or note to any line in this Part VI		-	
Sec	tion A. Governing Body and Management		Yes	No
4.	Enter the number of voting members of the governing body at the end of the tax year 18		163	140
ıa	Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
L	10			
	Enter the number of voting members included in line 1a, above, who are independent  10 lid any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2		2	Х	
2	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	-	X
4	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
5	Did the organization have members or stockholders?	6	Х	
6 72	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or			
10	more members of the governing body?	7a	X	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
U	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		· · · · ·	
	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		.,	
	ın Schedule O how this was done .	12c	X	v
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45-		Х
a	The organization's CEO, Executive Director, or top management official	15a 15b		X
b	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
100	taxable entity during the year?	16a	,	х
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	.00		
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection, indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule 0)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cıal	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion: 🕨	·	
	The Organization - 870-772-4661			
	3015 East 9th Street, Texarkana, AR 71854-5875			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)  Name and Title	(B) Average	(C) Position		(D) Reportable	(E) Reportable	<b>(F)</b> Estimated					
Name and Title	hours per week	box	(do not check more than one box, unless person is both an officer and a director/trustee)		compensation	compensation from related	amount of other				
	(list any hours for related organizations below line)	Individual trustae or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) Brandon Wren	0.50	,		Х				0.	0.	0	
President	0.50	X		Λ	$\vdash$			0.	<u> </u>	0.	
(2) Mark Santifer	0.30	x		Х				0.	0.	0.	
Vice President	0.50	^		^		├╌		0.	- 0.	- 0.	
(3) Chace Groves	0.30	Х		X	l		ļ	0.	0.	0.	
Secretary/Treasurer (4) Byron Bryant	0.50	^		Λ		├-				<del></del>	
Director	0.50	X						o.	0.	0.	
(5) Clyde Davis	0.50	-	-		<del>                                     </del>	<del>                                     </del>					
Director		х			İ			0.	0.	0.	
(6) Charles Dieffenbacher	0.50				-						
Director		Х						0.	0.	0.	
(7) Duane Falls	0.50										
Director		Х			_			0.	0.	0.	
(8) Steve Groves	0.50		'					_	_	_	
Director		X			ļ		<u> </u>	0.	0.	0.	
(9) Lewis Lagrone	0.50		<b>i</b> !			Ì	ĺ				
Director		Х			<u>L</u> .	<u> </u>		0.	0.	0.	
(10) Gary McAdams	0.50						ŀ				
Director		X	_		<u> </u>	-	ļ. <u>.</u>	0.	0.	0.	
(11) Curtis Mudford	0.50						ļ	ο.	0.	_	
Director	0.50	Х	_		ļ <u> </u>	⊢		<u> </u>	<u> </u>	0.	
(12) Rusty Pendergraft	0.30	X						0.	0.	0.	
Director	0.50	^		_		-		0.	0.		
(13) Terry Reeves Director	0.50	Х					ŀ	o.	0.	0.	
(14) Joe Rice	0.50	-			-					<u>·</u>	
Director		Х	ļ.,			,	•	0.	0.	0.	
(15) Charles Santifer	0.50									<u>-</u>	
Director		Х						0.	0.	0.	
(16) Barbara Sutton	0.50										
Director		Х	L				_	0.	0.	0.	
(17) Don Sutton	0.50										
Director	<u> </u>	X	<u> </u>			<u>L.</u>		0.	0.	0.	

Form 990 (2013)

Par	t VII Section A. Officers, Directors, Tr	ustees, Key Em	ploy	ees/	, an	d Hi	ighe	st C	compensated Employee	es (continued)				
•	(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					one h an	(D) Reportable compensation from	(E)  Reportable compensation from related		l	(F) stimate mount other	
		(list any hours for related organizations below line)	Individual trustae or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W·2/1099·MISC)	organization: (W-2/1099-MIS		fr org an	npensa rom the ganizated relate anizate	e Ion ed
	William Varner, Sr.	0.50	Х						0.		0.			0.
Dire	ector		^						0.		0.			
											<u> </u>			
				ļ 										
								<u>-</u>						
							0.			0.				
	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section A						<b>▶</b>	0.	<del>-</del>	0.			0.
2	Total number of individuals (including bu compensation from the organization	t not limited to th	ose	liste	ed a	bov	e) wi	no r	eceived more than \$100	,000 of reportabl	e		Yes	0 No
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J fo		uste	e, ke	еу ег	mplo	oyee	, or	highest compensated ei	mployee on		3	165	X
4	For any individual listed on line 1a, is the and related organizations greater than \$									the organization		4		Х
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," co	•				•		elat	ed organization or indivi	dual for services		5		Х
Sec 1	tion B. Independent Contractors  Complete this table for your five highest		400	200			roote	·m •	that received more than	\$100 000 of com	nene	ation	from	
	the organization. Report compensation for										ipens			
	(A) Name and busine	ss address	NO	ІИС	<u> </u>			_	(B) Description of s	ervices	С		C) ensatio	n
												<u>_</u>		
					-									
_														<u> </u>
2	Total number of independent contractors \$100,000 of compensation from the organization		ot li	mıte	d to		se li: O	stec	d above) who received m	ore than				

		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII	_		
•		Oneda ii Guiledale G daile	unis a response	or note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts	1 a	Federated campaigns	1a					
E Z		Membership dues	1b					
Contributions, Gifts, Grants and Other Similar Amounts	c		1c					
	d		1d					
, E	e		<del>                                      </del>					
ë ë		All other contributions, gifts, gran		<del></del>				
돌힐	•	similar amounts not included abo						
ξŏ	_	•						
5 6	_	Noncash contributions included in lines  Total. Add lines 1a-1f	12-17 \$					
		Total / too mico / ta ii		Business Code				
e l	2 a	County Membersh	ip Dues	110000	49,395.	49,395.		
ž	b							
Se	c			"				
e a	d							
Program Service Revenue	-	****		-				
Pro	f	All other program service reve	enue					
		Total. Add lines 2a-2f	71.00	<b>•</b>	49,395.			
	3	Investment income (including	dividends, intere	est, and				
	•	other similar amounts)		<b>&gt;</b>	630.			630.
	4	Income from investment of ta	x-exempt bond r	proceeds	-			"
	5	Royalties	x exempt bend p	<b>&gt;</b>	1,003.		_	1,003.
	•	Noyalties	(ı) Real	(II) Personal			-	· · · · · · · · · · · · · · · · · · ·
	6 -	Gross rents	31,203.					
		Less rental expenses	0.					
		•	31,203.					
		Rental income or (loss)	31/2036		31,203.	<u> </u>		31,203.
		Net rental income or (loss)	(1) (2)	(1) (2)	317203.			01/2000
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
	_	assets other than inventory						
	b	Less cost or other basis		1 210				
		and sales expenses		1,219. -1,219.				
;		: Gain or (loss)		-1,219.	1 210			1 210
		Net gain or (loss)		<b>P</b>	-1,219.			-1,219.
e	8 a	Gross income from fundraisin	g events (not					
en (en		including \$	of					
è		contributions reported on line	1c). See					
Other Reven		Part IV, line 18	а					
돋	b	Less: direct expenses	b	<u> </u>				
·	C	<ul> <li>Net income or (loss) from fund</li> </ul>	draising events	<b>•</b>				
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	а					
	t	Less: direct expenses	b					
	C	: Net income or (loss) from gan	ning activities	<b>D</b>				
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
	t	Less: cost of goods sold	b					
	C	Net income or (loss) from sale	es of inventory	<b></b>				
		Miscellaneous Revenu		<b>Business Code</b>				
	11 a	Insurance Servi		524298	114,944.		114,944.	
		Miscellaneous 1		900099	2,333.			2,333.
		All other revenue						
	_	Total. Add lines 11a-11d	•	<b>•</b>	117,277.	,		
	12	Total revenue. See instructions.		▶ أ	198,289.		114,944.	33,950.
33200							<u> </u>	Form <b>990</b> (2013)

Form 990 (2013) Miller County Farm Bureau
Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All othe	er organizations must c	complete column (A).	
	Check if Schedule O contains a respon		this Part IX	· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	2,500.			· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	]			
	trustees, and key employees	_			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	80,560.	<del></del>		
7	Other salaries and wages	80,380.			
8	Pension plan accruals and contributions (include	1 040			
^	section 401(k) and 403(b) employer contributions)	1,040. 2,254.	<del></del>		
9	Other employee benefits Payroll taxes	6,910.			
10 11	Fees for services (non-employees)	0,5100	<del>-</del>		
''	Management				
b	Legal				
c	Accounting	1,200.			
ď	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)		. <u>.</u>		
12	Advertising and promotion	11,457.	<del></del>		
13	Office expenses	21,255.			<del></del>
14	Information technology				
15	Royalties	27 251		<u> </u>	
16	Occupancy	27,251.			
17	Travel			-	
18	Payments of travel or entertainment expenses				•
40	for any federal, state, or local public officials	17,476.	·		
19	Conferences, conventions, and meetings	1,72,00		<u> </u>	
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization	15,694.			
23	Insurance	489.			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A)	,			
	amount, list line 24e expenses on Schedule O)				·······
а	Youth and Safety	2,300.			
b	Miscellaneous	690.		<u> </u>	
c					
d				<u> </u>	
е	All other expenses	101 076		<del></del> -	<del> </del>
25	Total functional expenses. Add lines 1 through 24e	191,076.		-	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here   if following SOP 98-2 (ASC 958-720)				
	1000 P 1 1 1000 WIND 30 P 30 Z (A3C 330 P / ZU)	,			

Form 990 (2013)
Part X. Balance Sheet

		Balance Sheet  Check if Schedule O contains a response or not	e to any line in this Part X	·		
•				(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		200.	1	200.
	2	Savings and temporary cash investments	163,437.	2	184,411.	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and fo	ormer officers, directors,			
		trustees, key employees, and highest compensation				
		Part II of Schedule L			5	
	6	Loans and other receivables from other disquali	fied persons (as defined under			
		section 4958(f)(1)), persons described in section				
		employers and sponsoring organizations of sect				
S.		employees' beneficiary organizations (see instr).		6		
Assets	7	Notes and loans receivable, net	·		7	
ĕ	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		9		
	10a					
		basis. Complete Part VI of Schedule D	10a 417,320.			
	ь	Less: accumulated depreciation	10a 417,320. 10b 276,040.	155,346.	10c	141,280.
	11	Investments · publicly traded securities		11		
	12	Investments · other securities. See Part IV, line	l <b>1</b>		12	
	13	Investments · program-related. See Part IV, line		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	318,983.	16	325,891.
	17	Accounts payable and accrued expenses		1,754.	17	1,754.
	18	Grants payable		18		
	19	Deferred revenue		14,808.	19	14,503.
	20	Tax-exempt bond liabilities	<u>l</u>		20	
	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	<del></del>
S	22	Loans and other payables to current and former	officers, directors, trustees,			
Ě		key employees, highest compensated employee	es, and disqualified persons.			
Liabilities		Complete Part II of Schedule L	ļ		22	
_	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	
	25	Other liabilities (including federal income tax, pa	-			
		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
		Schedule D		16.760	25	16.055
	26	Total liabilities. Add lines 17 through 25		16,562.	26	16,257.
		Organizations that follow SFAS 117 (ASC 958	l l			
ë		complete lines 27 through 29, and lines 33 an	id 34.			
auc	27	Unrestricted net assets			27	
Bal	28	Temporarily restricted net assets			28	<del></del>
Net Assets or Fund Balances	29	Permanently restricted net assets		······································	29	
Ţ		Organizations that do not follow SFAS 117 (A				
ō		and complete lines 30 through 34.	•		^	
šets	30	Capital stock or trust principal, or current funds		0.	30	0.
Ass	31	Paid-in or capital surplus, or land, building, or ed	r	0.	31	0.
et,	32	Retained earnings, endowment, accumulated in	come, or other funds	302,421.	32	309,634.
2	33	Total net assets or fund balances		302,421.	33	309,634.
	34	Total liabilities and net assets/fund balances		318,983.	34	325,891.

orm	990 (2013) Miller County Farm Bureau	71-03	31296	Pag	<u>e 12</u>
Pai	TXI Reconciliation of Net Assets			_	
	Check if Schedule O contains a response or note to any line in this Part XI				
•					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	198	,28	39.
2	Total expenses (must equal Part IX, column (A), line 25)	2		,07	
3	Revenue less expenses. Subtract line 2 from line 1	3		,21	<u>13.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	302	, 42	21.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities .	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	309	,63	<u> 34.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
			r	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.		1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<del></del>	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis			1	
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,		- 1	
	consolidated basis, or both:		1 1	- 1	
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		<del></del>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt		1	v
	Act and OMB Circular A-133?		3a		<u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	200	
			Form	<del>1</del> 90 (2	2013)

#### SCHEDULE C

(Form 990 or 990-EZ)

**Political Campaign and Lobbying Activities** 

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Name of orga				Empl	oyer identification number
		County Farm Bure			71-0331296
	a description of the organiz	ganization is exempt un zation's direct and indirect polit			
Part I-B	·	<u>janization is exempt un</u>			
	· · · · · · · · · · · · · · · · · · ·	incurred by the organization ur		<b>&gt;</b> \$	
	·	incurred by organization mana	-	<b>5</b> 5 <b>▶</b> \$	
	=	n 4955 tax, did it file Form 472	0 for this year?		Yes No
	correction made?				Yes No
Part I-C	describe in Part IV	janization is exempt un	dor coation E01/a	A expent spetion 501/	01/31
		<del></del>			<del></del>
		by the filing organization for s			
		ization's funds contributed to c	otner organizations for	section 527	
•	function activities	. Add have 4 and 0 Fatou have	Form 1100 DO		<u>-</u>
	•	s. Add lines 1 and 2. Enter here	and on Form 1120-PO		
line 17b		4400 DOL 6		▶\$	Yes No
	filing organization file Form	· · · · · · · · · · · · · · · · · · ·	TINI) of all postupe 507 -	- alitical arcanizations to which	
	•	mployer identification number (f ition listed, enter the amount pa	•	•	• •
•	•	comptly and directly delivered to			·
	•	additional space is needed, pro	•	•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
			_		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013	Mille	r Coun	tv Farm Bur	eau	71-0	331296 Page 2
Part II-A Complete if the org	anizatio	n is exer	npt under sectio	n 501(c)(3) and file		,
(election under sec			.,			
<u></u>			ated group (and list in	Part IV each affiliated	group member's nan	ne. address. EIN.
expenses, and shar				Training of the second contraction of	<b>9. • • p</b>	,
			d "limited control" pro	visions anniv		
B Check P II the liling organizat	IOII CIIECN	eu box A an	a minea control pre	VISIONS apply:	(a) Filing	(b) Affiliated group
		bying Exper			organization's	totals
(The term "expend	litures" m	eans amou	nts paid or incurred.		totals	
1a Total lobbying expenditures to influ	ience nub	lic opinion (c	rass roots lobbying)			
b Total lobbying expenditures to influ				,		
c Total lobbying expenditures (add lii			, (aest 1000)g,	·		
		u 10,		Ī		
<ul><li>d Other exempt purpose expenditure</li><li>e Total exempt purpose expenditure</li></ul>		e 1c and 1d	1	Ĭ		
f Lobbying nontaxable amount. Ente				h columns		
If the amount on line 1e, column (a) o			ying nontaxable am	11		,
Not over \$500,000	i (u) is.		he amount on line 1e			
Over \$500,000 but not over \$1,000	000		0 plus 15% of the exc			
				ess over \$1,000,000.		
Over \$1,000,000 but not over \$1,5						
	Over \$1,500,000 but not over \$17,000,000       \$225,000 plus 5% of the excess over \$1,500,000.         Over \$17,000,000       \$1,000,000.					
Over \$17,000,000		\$1,000,0				
g Grassroots nontaxable amount (en	ter 25% c	f line 1ft				
<ul><li>g Grassroots nontaxable amount (en</li><li>h Subtract line 1g from line 1a. If zero</li></ul>						
i Subtract line 1f from line 1c. If zero				Ī		
j If there is an amount other than ze.			ine 11. did the organiz	ation file Form 4720		
reporting section 4911 tax for this	_					Yes No
	4	4-Year Ave	raging Period Under	Section 501(h)		
(Some organiz	ations the	at made a s	ection 501(h) electio	n do not have to comp	lete all of the five	
СО				es 2a through 2f on pa	ge 4.)	
	Lob	bying Exper	ditures During 4-Ye	ar Averaging Period	<u> </u>	<del></del>
Calendar year				4,,0040	4.0.0040	(a) Tatal
(or fiscal year beginning in)	(a)	2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					<del></del>	_
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
T. A. I.I. I.I. I. I. I. I. I. I. I. I. I. I						
c Total lobbying expenditures			<u> </u>			
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						1
f Grassroots lobbying expenditures						1

## Schedule C (Form 990 or 990 EZ) 2013 Miller County Farm Bureau 71-0331296 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

for each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description		n)	(b)	
of the lobbying activity			Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or			,	
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?	ļ			
g Direct contact with legislators, their staffs, government officials, or a legislative body?	<u> </u>			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912		]		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	<b></b>	<u> </u>	<del></del>	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		(=\)		
Part III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	tion 501(c)	(5), or se	ction	
50 f(c)(o).	<del> </del>		Yes	N
		I		<del>                                     </del>
Mars substantially all (000/ or more) dusp resputed pendeductible by members?		1	X	l .
		1	X	
Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	tion 501(c) ed "No," Ol	2 3 (5), or se	X	·
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### **SCHEDULE D**

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Miller County Farm Bureau

**Employer identification number** 71-0331296

Par	TI Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor of	• •	•
	impermissible private benefit?	•	Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t holds?	L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year 🕨 \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	the organization's accounting for
	conservation easements	<del></del>	
Par	t III Organizations Maintaining Collections o		Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		_
	historical treasures, or other similar assets held for public ex		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
ь	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	<b>.</b> .
a	Revenues included in Form 990, Part VIII, line 1		. • \$
Ь	Assets included in Form 990, Part X		. • \$

		County Far	m Bu	<u>reau</u>				<u>71-03</u>	31296	Page 2
Pai	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	reasures, o	or Othe	er Simil	ar Asse	ts(continu	ued)
3										
	(check all that apply)									
а	Public exhibition	(	d 🗌	Loan or exc	hange progra	ams				
b	Scholarly research			Other	3-1					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	nev further t	the organization	on's exe	mpt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit of	•								
ŭ	to be sold to raise funds rather than to be m					Ci Siiriila	455015		Yes	□ No
Pa	TIV Escrow and Custodial Arran					'Yes' to	Form 990	Dart IV		
_ · •	reported an amount on Form 990, Pa		ete ii tiie	organizatio	on answered	763 10	101111 330	,, , ant , , ,	c 5, 61	
12	Is the organization an agent, trustee, custod		diany for	contribution	ne or other as	eate not	included			
ıa	on Form 990, Part X?	an or other interme	ulary IUI	CONTINUUTION	is of Other as	sets not	Included		Yes	No
	·			. داداد.				_	_ 1es	
b	If "Yes," explain the arrangement in Part XIII	and complete the to	ollowing	able.					<b>A</b>	
							<u> </u>	<del></del>	Amount	
C	Beginning balance						1c	<del> </del> -		
d	Additions during the year						1d	<del></del> -		
е	Distributions during the year						1e	<del></del>		
f	Ending balance						1f	<del></del>		
2a	Did the organization include an amount on F							L	_ Yes	∐ No
	If "Yes," explain the arrangement in Part XIII.									
Pai	t V Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo	orm 990, Part	IV, line 1	0.		<del></del> -	
		(a) Current year	<b>(b)</b> P	rior year	(c) Two year	s back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance								<u> </u>	
ь	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities		ĺ			i			ľ	
	and programs									
f	Administrative expenses	,				_				
g	End of year balance								-	
2	Provide the estimated percentage of the cur	rent vear end balanc	ce (line 1	g, column (	a)) held as:					
а	Board designated or quasi-endowment	•	%							
ь	Permanent endowment ▶	%	_							
c	Temporarily restricted endowment ▶	<del></del> %								
	The percentages in lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posse	·	ation tha	at are held a	and administe	red for t	he organi	zation		
	by:						J		1	Yes No
	(i) unrelated organizations 3a(i)									
	(ii) related organizations								3a(ii)	
h	If "Yes" to 3a(ii), are the related organizations	e listed as required a	on Scher	dule R2					3b	
4	Describe in Part XIII the intended uses of the	· ·							00	
	t VI Land, Buildings, and Equipm		Owillent	iulius						
1 61	Complete if the organization answere		) Part IV	line 11a S	See Form 990	Part X	line 10			
		<del></del>			t or other			od	(d) Rook	value
	Description of property	(a) Cost or of basis (investigation)			(other)		ccumulate preciation		(d) Book	value
	lood	Dasis (IIIVest	menty				J. COIAHOII		5/	,477.
_	Land				34,477. 30,101.	<del></del>	202,9	96		,105.
Ь	Buildings	<u> </u>			00,101.		202,9	<del>20 •</del>		,105.
C	Leasehold improvements	<del></del>			A 01A		15 1	16		600
d	Equipment				4,814.		45,1		9	,698.
	Other	<del></del>			27,928.		27,9	20.	1 4 7	0.
Total	l. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line	10(c)) ,	_			141	,280.

(1) Federal income taxes
(1) Todard mount taxes
(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2013 Miller County Farm Burea	u	71-0331296	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ments With Reve	enue per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1	2a.		
1.	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
ь	Donated services and use of facilities	2b		
	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d	<u>,</u> , -	2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	i i	
	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
	t XII Reconciliation of Expenses per Audited Financial Stat	ements With Exc		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 1		onious por moranii	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
		2a		
a	Donated services and use of facilities	2b		
D	Prior year adjustments			
Ç -d	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
_	Add lines 2a through 2d		<u>2e</u>	
3	Subtract line 2e from line 1		3	<del></del>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 4-1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  † XIII Supplemental Information.	<del></del>	.   5	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; I 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			
—	<u></u>			
				<del></del>
			<del> </del>	
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#### **SCHEDULE O** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Miller County Farm Bureau

**Employer identification number** 71-0331296

Form 990, Part VI, Section A, line 2:
Explanation: Don Sutton and Barbara Sutton - family relationship
Charles Santifer and Mark Santifer - family relationship
Steve Groves and Chase Groves - family relationship
Form 990, Part VI, Section A, line 6:
Explanation: The Organization is a mutual benefit organization with
members.
Form 990, Part VI, Section A, line 7a:
Explanation: The board is elected annually by the general membership.
Officers are elected by the board.
Form 990, Part VI, Section A, line 7b:
Explanation: Policy resolutions are subject to member approval.
Form 990, Part VI, Section B, line 11:
Explanation: The office manager and Board President review the 990, and the
President signs it.
Form 990, Part VI, Section B, Line 12c:
Explanation: The conflict of interest policy is monitored by the Executive
Committee. If there is an issue, the Committee will meet to discuss, and if
warranted, the board member will be removed.

Form 990, Part VI, Section B, Line 15:

Schedule O (Form 990 or 990 EZ) (2013)	Page 2
Name of the organization  Miller County Farm Bureau	Employer identification number 71-0331296
Explanation: The Organization does not have compensated o	fficers or
management officials.	
Form 990, Part VI, Section C, Line 19:	
Explanation: These documents are not available to the pub	lic.
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